

POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION	lw	68904	4/5/00
O.I.P.E. CLASSIFIER		8	4-11-00
FORMALITY REVIEW			
RESPONSE FORMALITY REVIEW			
	UH	100	6-1

INDEX OF CLAIMS

✓ Rejected N Non-elected
 = Allowed I Interference
 - (Through numeral)... Canceled A Appeal
 ÷ Restricted O Objected

Claim	Date
Final	Original
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36	Q
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38	Q
39	✓
40	1
41	1
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Claim	Date
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Claim	Date
Final	Original
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If more than 150 claims or 10 actions
staple additional sheet here

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